

L 060000 22084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

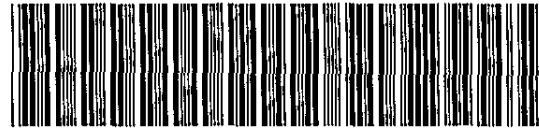
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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EFFECTIVE DATE  
2/24/06

2006 MAR -1 AM 11:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

06 MAR -1 AM 09:41  
DIVISION OF REGISTRATION



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 863626 4374758

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 160.

ORDER DATE : February 10, 2006

ORDER TIME : 9:22 AM

ORDER NO. : 863626-005

CUSTOMER NO: 4374758

EFFECTIVE DATE  
*2/24/06*

2006 MAR - 1 AM 11:26  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

FILED

DOMESTIC FILING

NAME: MAGBY LLC

EFFECTIVE DATE: FEBRUARY 24, 2006

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cynthia Woodyard - EXT. 2938

EXAMINER'S INITIALS: \_\_\_\_\_

2006 MAR 21 AM 11:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

MAGBY LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

EFFECTIVE DATE  
2/24/06

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

87 MOSLE ROAD, P.O. BOX 709  
GLADSTONE, NJ 07934

**Mailing Address:**

87 MOSLE ROAD, P.O. BOX 709  
GLADSTONE, NJ 07934

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

PHILIP A. MEYER

Name

690 TROPICAL CIRCLE

Florida street address (P.O. Box NOT acceptable)

SARASOTA,

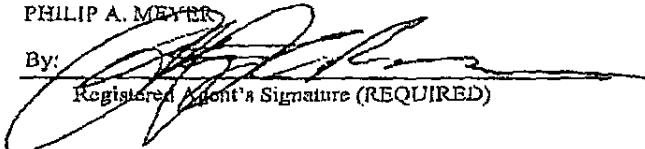
FL 34242

City, State, and Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

PHILIP A. MEYER

By:



Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

\_\_\_\_\_

\_\_\_\_\_

MGRM

ROBERT O. MEYER

87 MOSLE ROAD, P.O. BOX 1975

GLADSTONE, NJ 07934

\_\_\_\_\_

\_\_\_\_\_

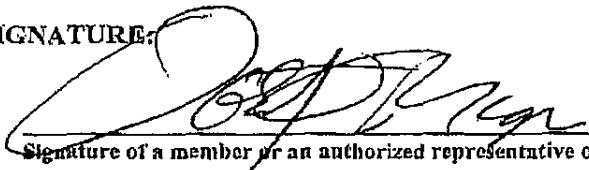
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: FEBRUARY 24, 2006. (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

By: ROBERT O. MEYER

\_\_\_\_\_  
Typed or printed name of signer

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)